

# *San Luis Obispo County Strategic Prevention Framework*



## **Reducing the Problems Associated with Alcohol and Other Drug Use**

**2007 - 2012**

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**San Luis Obispo County  
Department of Behavioral Health  
Drug and Alcohol Services  
*Prevention Team***



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## INTRODUCTION

San Luis Obispo County is a community that values awareness and knowledge of alcohol and other drug use and acts accordingly in a safe, healthy, responsible manner. – *SLO County Drug and Alcohol Services Vision Statement*

### **San Luis Obispo County**

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San Luis Obispo County (SLO) is the beautiful jewel of California's Central Coast and a community that prides itself on a healthy, friendly atmosphere. From the rolling hills, to the lush agricultural regions, to the unparalleled beaches, SLO County attracts tourists, students, retirees, businesses, and families seeking a safe environment and terrific neighbors. Our county, however, is no different than any other in the State, with its share (and in some cases more than its share) of problems associated with the use of alcohol and other drugs. This document outlines the Strategic Prevention Framework adopted by SLO County to both address those problems and to work toward maintaining our warm and inviting quality of life.

With a population of 257,000, SLO County is made up primarily of 75% Caucasian and 18% Latino/Hispanic individuals. The median household income is \$46,225 with an average of 2.5 individuals living in each home. Ten percent (10%) of the population lives below the poverty line. There are ten school districts with a combined 74,000 students K-12 (U.S. Census Bureau, 2005). San Luis Obispo County contains many rural and suburban communities, some of which are quite isolated from each other and located at significant distances from the centrally located city of San Luis Obispo. This isolation results in reduced services available to citizens who are often in greatest need of services due to the number of ethnically diverse and low income families who live and work in these out-lying communities.

The economy is centered around California Polytechnic State University (with 18,000 students), tourism, agriculture, and other government services, including the California Men's Colony, a State penal institution. San Luis Obispo County is the third largest producer of wine in California, surpassed only by Sonoma and Napa Counties. Wine grapes are by far the largest agricultural crop in the county, and the wine production they support creates a direct economic impact and a growing wine country vacation industry (California Wine, 2007). Eighty-five percent (85%) of residents primarily speak English in their homes, while 11% speak Spanish. The growth of agricultural production (including wine) has created an expanding Spanish-speaking working class that is often underserved in public health due to language, transportation and cultural issues.

The City of San Luis Obispo, with a population of 44,000, has a higher-than-state-average density of alcohol sales licenses; a major university with a higher-than-average binge drinking rate; and an inflated per-capita rate of DUI incidents. The dense, student-occupied neighborhoods around the city are regular sources of frustration for longtime city residents, and for police who are often too busy to enforce an outdated social host statute.

### **County of San Luis Obispo Mission Statement**

**The County's elected representatives and employees are committed to serve the community with pride to enhance the economic, environmental and social quality of life in San Luis Obispo County.**

## San Luis Obispo County Strategic Prevention Framework

The County government structure is seated in the City of San Luis Obispo and is overseen by an elected Board of Supervisors, with an appointed County Administrative Officer. The San Luis Obispo County Health Agency encompasses the Departments of Public Health, and Behavioral Health Services (BHS). BHS contains the Division of Drug and Alcohol Services (DAS), the County's alcohol and drug program. SLO County DAS provides a continuum of services from prevention, to treatment, and maintenance of sobriety. The Prevention Team provides all SAPT-funded alcohol and other drug (AOD) prevention programming. The recent reorganization of the Health Agency, to include Drug and Alcohol Services as part of the Behavioral Health Department, has created opportunities for the County to utilize the training and expertise of the DAS prevention programs to establish evidence-based practices while implementing Mental Health Services Act (MHSA) prevention programming.

### **Drug and Alcohol Services Mission Statement**

**Drug and Alcohol Services promotes safe, healthy, responsible, and informed choices concerning alcohol and other drugs through programs responsive to community needs.**

AOD prevention programs in San Luis Obispo County address all ages, ethnicities, and socioeconomic groups by providing needs-based responses to community issues. DAS' school programs range from youth development strategies, such as Friday Night Live (FNL), to evidence-based school counseling approaches like Student Assistance Programs and Dare to Be You. Community coalitions are formed in partnership with DAS throughout the County to address substance abuse issues; these groups make up the SLO County Prevention Alliance and Asset Development Network. Specific interventions in underserved communities include Family Strengthening courses provided in bilingual and bicultural settings, HIV outreach and education to high-risk populations, and a full complement of youth and family programs in rural communities.

DAS' Prevention Team collaborates with multiple public agencies and private organizations in addressing the often-complex array of community substance use issues. DAS' strong partnership with local law enforcement includes both a Countywide approach to DUI reduction, as well as alcohol retailer compliance programs. SLO County's Probation Department teams with the DAS Prevention Team to provide selected and indicated prevention engagement for youth offenders, as well as re-entry prevention for incarcerated juveniles. The County Office of Education and DAS collaborate throughout the year in providing training, capacity building, and evaluation services for local schools and youth programs. The San Luis Obispo County Friday Night Live Partnership, established in 1991, is a unique public-private collaboration between the County DAS and the local non-profit FNL organization.

### **Drug and Alcohol Services Prevention Team Mission Statement**

San Luis Obispo County Drug and Alcohol Services' Prevention Team provides a framework for collaborative county-wide prevention of substance abuse and its related problems by engaging families, neighborhoods, and communities to promote safe and healthy environments through the following strategies:

- Information dissemination and media advocacy
- Education and skills building
- Alternative activities
- Problem identification and referral
- Community based processes
- Environmental and policy development

### **SLO County Strategic Prevention Planning**

San Luis Obispo County has been actively preparing this plan in response to California Alcohol and Drug Programs' (ADP) requirement that counties use the Strategic Prevention Framework (SPF), a planning and program design tool developed by the federal Substance Abuse and Mental Health Services Administration (SAMHSA). The SPF consists of five steps (assessment, capacity building, planning, implementation, and evaluation) and aims to enable counties to build the infrastructure necessary for effective and sustainable prevention through a community-based approach.

To implement the SPF in San Luis Obispo County, the DAS Prevention Team has synthesized several years of community collaborations and needs assessments to develop a comprehensive and community-based AOD-related prevention framework that will guide program planning and service delivery for the next several years. DAS facilitated this planning process first by assessing San Luis Obispo County's AOD-related problems and utilizing many methods of community participation in identifying factors that contribute to these problems. The collaborative nature of this process will aid our County in developing a common understanding of needs and resources with respect to AOD-related problems, and further our effectiveness in selecting appropriate and evidence-based prevention strategies.

The main planning was done by the DAS Prevention Team, led by Program Supervisor Frank Warren. Wayne Hansen, a County Administrative Services Officer (ASO) and longtime leader in the California prevention field, served as the advisor to the project. Administrative Services Manager Kerry Bailey, ASO Jason Wells, and Prevention team member Kimberly Kurtzman edited the final document. Prevention team members Kimberly Mott, Elisa Leigan, and Jennifer Pantaleo crafted the language delineating the problem statements, goals and objectives. Community partners contributing to the SPF process included: Laurie Morgan and Shannon White-Bond, Chairpersons of the Prevention Alliance; Lorena Saldana of the SLO County Youth Council; and Rich Powell, President of the SLO Friday Night Live Partnership (SLOFNLP) Board of Directors. The past five years have seen hundreds of community members, youth, professionals, and DAS staff members contributing to the assessment, capacity building, planning, and implementation of our County's SPF plan.

### **Guiding Prevention Principles**

The following principles were adapted from the Office of National Drug Control Policy's (ONDCP) "Principles of Prevention" (Office of National Drug Control Policy, 2007) and include 15 principles and guidelines drawn from a growing body of research. DAS has used these principles, along with the Center for Substance Abuse Prevention (CSAP) domain-

based principles (CSAP, 2001) in planning and implementation of programs over the past several years. In approaching the SPF process, it was determined by DAS Prevention to structure our needs assessment and goal setting in the framework of the following principles:

### **Address Appropriate Risk and Protective Factors for Substance Abuse in a Defined Population**

- **Define a population.** DAS Prevention defines populations by age, sex, race, geography (neighborhood, community, or region), and institutions (school or workplace).
- **Assess levels of risk, protection, and substance abuse for that population.** DAS Prevention seeks to identify and decrease “risk factors”, which increase the risk of substance abuse, and increase “protective factors” which inhibit substance abuse in the presence of risk.
- **Focus on all levels of risk, with special attention to those exposed to high risk and low protection.** Our prevention programs and policies should focus on all levels of risk, with special attention given to the most important risk factors, protective factors, psychoactive substances, individuals, and groups exposed to high risk and low protection in a defined population.

### **Use Approaches that Have Been Shown to be Effective**

- **Reduce the availability of illicit drugs, and of alcohol and tobacco for the under-aged.** Community-wide laws, policies, and programs can reduce the availability and marketing of illicit drugs. They can also reduce the availability and appeal of alcohol to those who are underage.
- **Strengthen anti-drug-use attitudes and norms.** Programs such as Friday Night Live focus on environmental support for anti-drug-use attitudes by sharing accurate information about substance abuse, encouraging drug-free activities, and engaging youth to advocate for laws, and policies related to illicit substances.
- **Strengthen life skills and drug refusal techniques.** Programs such as Friday Night Live teach life skills and drug refusal skills, using interactive techniques that focus on critical thinking, communication, and social competency.
- **Reduce risk and enhance protection in families.** DAS programs aim to strengthen family skills by engaging families in setting rules, clarifying expectations, monitoring behavior, communicating regularly, providing social support, and modeling positive behaviors.
- **Strengthen social bonding.** DAS prevention programs strengthen social bonding and caring relationships with people by holding strong standards against substance abuse in families, schools, peer groups, mentoring programs, religious and spiritual contexts, and structured recreational activities.
- **Ensure that interventions are appropriate for the populations being addressed.** DAS prevention interventions, including programs and policies, should be acceptable to and appropriate for the needs and motivations of the populations and cultures being addressed.

### **Intervene Early at Important Stages, Transitions, and in Appropriate Settings and Domains**

- **Intervene early and at developmental stages and life transitions that predict later substance abuse.** Such developmental stages and life transitions can involve

biological, psychological, or social circumstances that can increase the risk of substance abuse.

- **Reinforce interventions over time.** Our approach is to repeat exposure to scientifically accurate and age-appropriate anti-drug-use messages and other interventions, especially in later developmental stages and life transitions, that may increase the risk of substance abuse. This reinforcement approach helps to ensure that skills, norms, expectations, and behaviors learned earlier are reinforced and therefore maintained over time.
- **Intervene in appropriate settings and domains.** DAS prevention programs intervene in settings and domains that most affect risk and protection for substance abuse, including homes, social services, schools, peer groups, workplaces, recreational settings, religious and spiritual settings, and communities.

### Manage Programs Effectively

- **Ensure consistency and coverage of programs and policies.** Implementation of prevention programs, policies, and messages for different parts of the community should be consistent, compatible, and appropriate.
- **Train staff and volunteers.** To ensure that prevention programs and messages are continually delivered as intended, training should be provided regularly to staff and volunteers.
- **Monitor and evaluate programs.** To verify that goals and objectives are being achieved program monitoring and evaluation should be a regular part of DAS program implementation.

### The Strategic Prevention Framework

The five steps that comprise SAMHSA's Strategic Prevention Framework will enable San Luis Obispo County and our communities to build the infrastructure necessary for effective and sustainable prevention. Each step contains key milestones and products that are essential to the validity of the process. The SPF is conceived of in systemic terms and reflects a public health, or community-based, approach to delivering effective prevention. (SAMHSA, 2005)

#### ***The Five Steps of SAMHSA's Strategic Prevention Framework:***

- Step #1: Profile population needs, resources, and readiness to address needs and gaps
- Step #2: Mobilize and/or build capacity to address needs
- Step #3: Develop a Comprehensive Strategic Plan
- Step #4: Implement evidence-based prevention programs, policies, and practices
- Step #5: Monitor, evaluate, sustain, and improve or replace those that fail





## **SPF STEP 1: ASSESSMENT**

The assessment phase helps define the problem or the issue that a project needs to tackle. This phase involves the collection of data to:

- Understand a population's needs
- Review the resources that are required and available
- Identify the readiness of the community to address prevention needs and service gaps. (SAMHSA, 2007)

### **Overview of Assessment Process**

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In June 2006, San Luis Obispo County Drug and Alcohol Services' Prevention Team began compiling data and information accumulated over the past seven years. To conduct a proper assessment of the nature and scope of AOD-related problems in San Luis Obispo County, our Team reviewed national, state, and local surveys; focus group and stakeholder interview transcripts, coalition meeting notes, and media items. This process involved the following steps:

#### **Collection of primary local AOD use and risk factors data**

- California Healthy Kids Survey
- Safe and Drug Free Schools Surveys
- FNL Youth Development Surveys
- School Counseling Pre/Post Tests
- SAFE Pre/Post Tests
- Dare to Be You Assessments
- Treatment (Cal OMS)
- DUI arrests
- Cal Poly Drinking Survey

#### **Collection of secondary local AOD use, risk factors and perception data**

- Youth Issues Conference focus group reports
- Enforcing Underage Drinking Laws advisory focus group report
- Town Hall Meeting on Underage Drinking
- Law enforcement arrest data and stakeholder notes
- Community coalition reports
- Prevention Alliance meeting minutes
- Off-sale and on-sale alcohol outlet compliance records
- Action for Healthy Communities Survey
- SWITRS alcohol related traffic crash injury and fatality data
- Cal Poly alcohol attitude surveys
- Stakeholder interviews and reports
- Media articles and broadcasts
- Alcohol Beverage Control licensing data
- Media market alcohol advertising data
- School disciplinary referrals
- Probation reports and other juvenile justice data

#### **Collection of national and state data to assess trends and comparisons**

- California Student Survey
- Monitoring the Future
- CalOMS treatment
- SWITRS
- CHP DUI arrests
- Alcohol Beverage Control licensing data

#### **Presentation of data findings to community forums for feedback**

- SLO County Prevention Alliance
- Asset Development Network
- Substance Abuse Policy Network
- Juvenile Justice Commission
- Children's Services Network

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- School Boards and Faculty presentations
- Cal Poly Substance Use and Abuse Committee (SUAC)
- EUDL Community Coalition (Mayor's Youth Task Force)

Over the past several years, DAS Prevention has tracked and reported these data sources in grant reporting, community forums, and planning processes. In drafting the SPF document, these past reports were reviewed and discussed in Prevention Team meetings. Community input has been sought in forums such as the monthly coalition meetings and trainings, quarterly Prevention Alliance meetings and the annual Cal Poly SUAC sessions.

The key question in guiding this process has been "What are the primary AOD issues facing SLO County at this moment?" This question, naturally, led us to more concentrated questions such as "What services are currently being offered to alleviate these issues?" and "What services are lacking in SLO County in order to address these issues?" The SPF process in our County was not driven by the current successes being recorded in our County, but by those areas where the community and the DAS Prevention Team felt more attention and resources would be needed to address problems.

As a result of the data gathering and analysis process, five priority problem areas needing action were identified:

- Underage Alcohol Use and Related Problems
- Adult High-Risk Alcohol Use and Related Problems
- Driving Under the Influence and Related Problems
- Youth Marijuana Use and Related Problems
- Methamphetamine Use, Production, and Related Problems

### ***The Problem with Underage and Adult High-Risk Drinking in SLO County***

The headline in the San Luis Obispo newspaper, *The Tribune*, on July 21, 2004 said it all: "**Drunken Crime is a Citywide Problem**". San Luis Obispo's Police Chief is quoted in the article, saying, alcohol use, and the behavior that stems from its abuse, "is one of the most significant problems in our community." (SLO Tribune, 2004) The community described by the Chief, and one of the focus communities for the SPF, encompasses the geographic area where the majority of students who attend California Polytechnic State University (Cal Poly) and the local community college, Cuesta College, reside. This area includes the city of San Luis Obispo (SLO) and county areas just beyond the city boundaries.

Cal Poly has 18,303 undergrad students enrolled (Cal Poly San Luis Obispo, 2004); approximately 10,000 students attend Cuesta College. (Cuesta Community College, 2004) The average number of liquor retail licenses per 100,000 (population) for SLO County is 294 compared to CA average of 191.6. Adult arrests for alcohol violations have climbed steadily since 1998 from 9.2 per 1,000 to 12.1 in 2001. SLO County's three year average rate is 11.3 compared to California's 5.9 and our comparison counties' rate of 9.8. (ADP, 2004)

San Luis Obispo County made national news headlines a couple years back with a story of drinking, violence, rioting and arrests. CNN and others put our community on the national stage during our annual Mardi Gras festivities held over a few weekend days in February, 2004. The normally colorful, spirited revelry had become increasingly strained with alcohol-fueled abuses over the past few years; and 2004 saw the roots of those abuses come to fruition. On the night of February 21, 2004 police dispersed over 5,000 young people, crammed into a small intersection on the perimeter of the Cal Poly State University campus, after hurdling bottles and rocks, and destroying property. Throughout that entire weekend officers made a total of 195 arrests for charges including assault with a deadly

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weapon, inciting a riot, failure to disperse, DUI, and public intoxication. Sixty-one percent of all the arrests were for public intoxication (City of San Luis Obispo, 2004); many of these arrests were for underage drinkers.

San Luis Obispo County youth have markedly high binge drinking rates, consistently above California state levels. The latest CA Healthy Kids Survey (CHKS) shows 27% of 11<sup>th</sup> graders reported binge drinking within the past 30 days, compared to the state figure of 21% . Additionally, 20% of 11<sup>th</sup> graders report drinking at least "enough to feel it a lot". (CHKS, 2005/2006) This level of drinking is resulting in significant legal problems for these youth. San Luis Obispo County youth alcohol related arrests are alarmingly high; more than twice the state average with 5.4 per 1000 13-17 year old youth arrested for alcohol related crimes versus the state rate of 2.1 alcohol related arrests per 1000 youth. (DOJ, 2004)

Ironically, while the rates for problem drinking among youth continue to escalate, the number of community members who say they are "not concerned" about drug, tobacco and alcohol abuse is rising. (Action for Healthy Communities, 2001/2003) This coincides with a similar, and disturbing trend among San Luis Obispo County youth that shows over the last six years a decreasing concern over the perceived harm of alcohol. In the local CHKS of 1999, two-thirds of 11<sup>th</sup> graders acknowledged that frequent use of alcohol was extremely harmful. That number dropped slightly in 2001, and dramatically declined to 36% and 35% in 2003 and 2006 respectively. This drop is also evident in our 9<sup>th</sup> and 7<sup>th</sup> graders participating in the Survey. (CHKS) This trend is made all the more alarming as state surveys show teens reporting *more* perceived harm over the past few years, rather than less. (CSS, 2002)

We can hypothesize, based on the data collected, that our county's youth are increasingly less concerned with the negative effects of alcohol because our community has done a better job of "normalizing" alcohol use, than it has in demonstrating zero tolerance. San Luis Obispo is one of the top producers of wine in the State. Local media regularly reports on the wine industry, there are highly promoted wine (and beer) festivals, and Cal Poly has made significant press for launching a massive winemaking curriculum. Youth see regular and routine examples of adult alcohol use and promotion, both in home and the local media. That, coupled with the rising level of youth-targeted alcohol advertising nationally and the increasing display of positive alcohol use in television and film (CAMY, 2002/2004), leads us to believe that "normalization" is one of the major reasons for our urgent need to reduce high-risk drinking among youth.

Young people in our County have also witnessed softened approaches to the tolerance of alcohol-related behaviors. Take, for instance, the aforementioned "Mardi Gras riot." In the days following this event, the leading local newspaper, *The Tribune*, ran an editorial decrying the destructive outburst yet, rather than address the alcohol issue, proclaimed the "heart" of the problem was "the (Mardi Gras) parade." A parade, by the way, which occurred the day after the riot. Two pages later in that same edition of *The Tribune*, a list of riot arrestees was published, which made it clear that the heart of the problem was alcohol...and underage drinking. In the news that resulted from this event, young people learned that Cal Poly would not issue any punishment for students involved other than a voluntary 90-minute counseling session and a one-page essay.

High school students in San Luis Obispo are sitting in class with people under the influence of alcohol or other drugs; 21% of juniors report having been drunk while on campus. (CHKS) This may also contribute to a perception that regular alcohol use is not risky or dangerous. Our high school youth also believe most of their friends (58%) would not care much, or at all, if they used alcohol. (CHKS) It is imperative that we uncover the causes of this type of perception in order to engage our youth and create effective prevention strategies for their binge drinking.

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A recent success, and still a tremendous obstacle, is the County's "Mid-State Fair" an annual summer event in Paso Robles which draws hundreds of thousands of visitors, including many young people. The Fair is well known for its high-quality entertainment, agriculture displays, and abundance of alcohol distributors. Youth have to pass through tens of alcohol booths on the way to the carnival "Midway" with rides and games. Alcohol distributors are often staffed with seasonal, untrained workers. DAS has worked with the Fair and local law enforcement over the past few years to conduct minor compliance checks, as well as working with the Fair management to reduce the amount of alcohol signage on site. Despite these successes, the Fair continues to be a major source of problems for law enforcement, parents, and community prevention leaders.

Paso Robles is an example of a "boom-town" where grape production and wineries have created thousands of new jobs, homes, and a population burst. One aspect of the wine explosion has been the increase in alcohol licensing for this once small, western town. Paso Robles currently has 37 retail alcohol sales licenses (ABC, 2007), and a population of 29,297; or, one license per 792 people. According to California Alcoholic Beverage Control (ABC), "The number of off-sale beer and wine licenses is limited to one for each 2,500 people in a city or county, and the number of beer and wine licenses that can be issued in a city or county *in combination with* off-sale general licenses is limited to one for each 1,250 people. (Section 23817.5)." A moratorium was placed on San Luis Obispo County licensing by ABC in 2005.

One area of need identified in the SPF process is the lack of beverage server training. Currently, ABC offers local on-sale beverage servers a voluntary training on a quarterly basis. The restaurant and bar associations locally have asked DAS to help provide more training opportunities, while the Drug and Alcohol Advisory Board has recommended policies that will mandate training for all local beverage servers. DAS is lacking resources, currently, which would provide staffing and resources to provide these trainings.

Another need to be addressed is a responsive parenting and family skills program for those families dealing with children who have begun exhibiting high-risk behaviors, and for those children and families of addicts and adults in treatment and recovery. These types of programs can use science-based approaches to decrease risk factors and build resiliency in family constructs. This is a priority for San Luis Obispo County.

Data collected and reviewed indicates that adult alcohol use in San Luis Obispo County results in high binge drinking rates; elevated emergency health care costs, and corresponds with further drug use. DAS treatment records indicate alcohol as the initial drug of choice for those currently seeking treatment for marijuana and methamphetamine.

The following problem statements best outline these findings:

**Problem Statement 1: SLO County continues to face problems associated with underage alcohol use and abuse. Binge drinking amongst local youth remains higher than the state average, as does recent alcohol use. Teen females now report more alcohol use than males. College drinking also remains a problem with 18-20 year olds facing school penalties, law enforcement problems, and emergency room visits.**

**Problem Statement 2: Alcohol use and abuse amongst the adult population of San Luis Obispo County continues to be a major factor in crime, health problems, DUIs, increased drug use, and suicide. Recent surveys have shown a majority of local university seniors binge drink regularly, and those same adult students had more problems succeeding in school, keeping jobs, and staying healthy. Local treatment statistics for adults confirm that alcohol use is the primary gateway drug of choice.**

### ***Current Prevention Response***

Underage drinking and adult high-risk drinking are priority issues for our County and, specifically, DAS' Prevention Team. A comprehensive approach of youth development, environmental policy, community education, and early problem identification has been the basis of our response to this problem. Central to our efforts around underage drinking is the Friday Night Live program which serves youth from 4<sup>th</sup> – 12<sup>th</sup> grades, at some level, in every school district in the County. FNL's youth development strategy and programming reduces risk factors while building protective factors that keep young people from drinking. FNL Mentoring and our school-based Counseling program furthers this approach with a selected prevention method of peer education and indicated prevention responses for those youth exhibiting early signs of alcohol abuse.

The coalitions which make up the Prevention Alliance work year-round to increase local capacity around parenting and family strengthening which reduce risk factors and increase protective factors. The Prevention Alliance (and its member coalitions) also advocates for public policy responses to reduce the access to alcohol for youth (e.g. social host policies), adults (e.g. keg registration), and the related problems. The Prevention Alliance provides DAS with focused data and information regarding local alcohol issues and will be critical to any further prevention implementation focusing on alcohol issues.

Other community partnerships have been forged for DAS to address this problem area. Warren Baker, the President of Cal Poly State University has established the Substance Use and Abuse Committee which seeks to address alcohol issues amongst the college communities of the County, and DAS plays an active role in educating the University as to evidence-based practices. The Enforcing Underage Drinking Laws grant program, funded by the Office of Juvenile Justice and Delinquency Prevention, created a partnership between the City of San Luis Obispo, Police Department, DAS, and a community coalition (Mayor's Youth Task Force) to address environmental responses to the issue of minor alcohol access. That project has yielded continuing efforts toward retail compliance checks with FNL youth;

increased capacity around improving social host policies; and immediate impacts such as the closure of “open lunch” at San Luis Obispo High School which reduced alcohol-related disciplinary referrals after lunch by 150% (San Luis Obispo High School, 2006).

### ***The Problem with Driving Under the Influence (DUI) in SLO County***

The County of San Luis Obispo averages 13 lives lost, and 237 injuries related to alcohol-involved collisions each year (CHP-SWITRS, 2004). This is of great concern to the general public, law enforcement and the DAS Prevention Team. DUI arrests and traffic collisions are on the rise despite the efforts made by law enforcement and partner agencies, like DAS, to curb this trend. In SLO County there has been a dramatic surge of DUI fatal vehicle collisions. During a 24-hour period this past January, SLO County experienced three fatal DUI collisions (DAS, 2007). Fatalities involving alcohol in SLO County affect all ages, ethnic groups, and socioeconomic levels.

San Luis Obispo County is known for its beaches, lakes and mountain areas. This brings in a variety of tourists and vacationers. The water sport-friendly destinations in the county invite the problems of DUI and BUI (boating under the influence). According to the DUI Task Force, the coalition of law enforcement focused on DUI prevention, during the summer and other holidays our county observes a rise of DUI arrests and fatalities associated with DUI/BUI drivers.

The growing wine industry has also been the subject of attention in DUI prevention assessments. Wine tasting is a popular local and tourist activity, and often the DUI's associated are associated with a lack of sober drivers, and untrained servers. Anecdotally, DUI arrestees admit to driving from winery to winery, and often forgetting just how much alcohol they have consumed. This alcohol effect, coupled with the often dimly lit, rural roads leading to and from the wineries, leads to collisions, injuries and sometimes death.

Currently, DAS enrolled 1800 clients last year into its licensed DUI program. Of the 628 active clients in the first half of 2007, 169 (26%) were between the ages of 18 and 24. (DAS, 2007) Having a large college community impacts the DUI issue as young adults frequent the active, saturated bar scene in downtown SLO, and the many parties held on any given weekend evening throughout the County. As Cal Poly and Cuesta College have grown, the primary residency of their student population has moved beyond the City and into all parts of the county, creating more driving distance between social functions. This, coupled with an already-inflated drinking and binge drinking rate among local college students, is a factor in our county's DUI problem.

**Problem Statement 3: Driving Under the Influence is a preventable crime that continues to plague San Luis Obispo County. Saturated alcohol licensing, alcohol-based tourism, rural roads, and a reduced perception of harm contribute to over 1,700 DUI-related injuries and fatalities - and over 1,300 DUI arrestees enrolled in County intervention programs annually.**

### ***Current Prevention Response***

DUI prevention is a critical component in SLO County's DAS prevention programming. For the past decade we have sought key partnerships with law enforcement and community groups to present effective strategies that are responsive to the issue of driving under the influence. Central to this effort has been the formation and the sustainability of the County

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DUI Task Force made up of representation from every law enforcement agency in the County. This group, coordinated by DAS, meets monthly to review data, train in evidence-based methods, and support DUI prevention efforts (e.g. Sobriety Check Points).

DAS recently received a grant from the Office of Traffic Safety (OTS), which increases both enforcement of DUI checkpoints and saturated patrols, while expanding media and public dissemination of DUI prevention information. Other partnerships between OTS and our agency have yielded DUI prevention aimed at monolingual Spanish-speaking citizens, seat-belt safety to reduce the problems associated with DUI, and bicycle safety programs to educate young people as to the importance of being sober on the roads at any level.

Our Friday Night Live County Youth Council program created "Casey's Pledge" which has been adopted across the nation as a simple strategy to encourage youth to make good choices around staying out of cars driven by drinking drivers. Our FNL "Every Fifteen Minutes" programs have been expanded to deal with the issue of underage drinking as well as the dangers of DUI. Community partnerships have included business sponsorships of "Sober Grad" programs including a program which awards a car to a graduating senior pledging to remain a sober driver.

DAS Prevention Team members are currently seeking opportunities for increased BUI interventions, as tourism around our lakes and beaches continues to be a source for alcohol misuse. The Team, along with the DUI Task Force, is also seeking interventions for reducing the increasing rate of drivers under the influence of prescription and other drugs.

### ***The Problem with Youth Marijuana Use in SLO County***

Marijuana use amongst SLO County adolescents is a concern to educators, health officials, parents and peers. In the past five years, DAS has tracked both the data culled from self-report surveys, and the outputs of focus groups and key informant interviews. Marijuana use among teens is an often-overlooked problem in our county, as it is not consistently linked to high-risk behaviors such as drinking and driving, further drug use, and overdose.

Youth in San Luis Obispo County are using marijuana at a rate higher than their peers across the state. Local 7<sup>th</sup> graders are reporting an increase in marijuana use over the past seven years. Those same 7<sup>th</sup> graders are using marijuana more frequently, and report more regular use of the drug to "get high." Across age groups, more marijuana is used on school campuses than tobacco. Peer perception is extremely skewed. Local high school juniors believe 95% of their peers regularly use marijuana; while only 41% of junior report any lifetime use. Local youth do not believe marijuana to be as dangerous or harmful as their peers across the State either. High school youth in SLO County believe marijuana to be less harmful than alcohol, and only 62% believe their friends would disapprove of using the drug. Finally, ¾ of local juniors believe it is easy to get marijuana (CHKS)

DAS treatment records tell an equally compelling story. Marijuana is the primary drug of referral for all youth in treatment in San Luis Obispo County, with alcohol and methamphetamine use following. Marijuana use is also the secondary drug of use for all local DUI program participants, many of which self-report regular use of the drug concurrent with drinking and driving behaviors. Youth in DAS' "Minor Accountability Program," a partnership with Probation, report marijuana use as the primary drug problem amongst all participants. (DAS, 2007)

Recent Youth Issues Conference focus groups have identified marijuana use as one of growing concern with peers at local high schools. Youth involved in marijuana use are often “slower,” hard to talk to,” “unreliable,” and “unattractive.” Parents have spoken out at community coalition forums asking for more intervention on school campuses, as well as increased education for younger students. School personnel focus groups and discussions with DAS staff have revealed a strong concern for the increasing number of academic failures and campus disturbances related to marijuana use.

**Problem Statement 4: Local youth report an increase in marijuana use, with average use over the State level. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. Marijuana use, often approved of by parents, is considered by many school officials to be the main obstacle for healthy academic development.**

### **Current Prevention Response**

There is currently no specific marijuana prevention program in San Luis Obispo County, although programs like Friday Night Live address the risk factors associated with marijuana use; while building the protective qualities which reduce the likelihood of a young person starting or continuing to use the drug. Friday Night Live Mentoring uses Project Alert in its sessions, which includes education and skill building around marijuana abstinence. DAS’ school-based selective prevention (e.g. SAP) addresses early marijuana use and problems via peer-led group and individual counseling.

Other local prevention responses include school health curricula which target drug prevention (e.g. DARE, Towards No Drug Use) and marijuana education. Community efforts such as the Asset Development Network strive to build resiliency and protective factors which help families resist marijuana use, and intervene early when a problem is detected.

### **The Problem with Youth Methamphetamine Use and Production in SLO County**

It has become increasingly apparent that San Luis Obispo County is caught in the destructive path of Methamphetamine (Meth); so much so that in March 2007, the County’s daily newspaper, The Tribune, printed a 4-day report detailing, “How One Drug Is Ruining Lives Across SLO County”. The report, while shocking to some, was viewed by most with an “*Its about time somebody reported on this problem*” response. Clearly the many people who have been affected by methamphetamine use know all too well how this drug is destroying lives in San Luis Obispo (SLO) County.

Methamphetamine production, use, exposure, and related problems are serious threats to the health and well being of the citizens of SLO County, particularly to youth and young adults.

San Luis Obispo is a rural county, with 61% of its land area devoted to farming. The SLO County Sheriff’s department reports that due to its rural nature and proximity to Highway 101, and Highway 1, SLO County is an ideal choice for clandestine methamphetamine laboratories and meth distribution.



Methamphetamine use by adults in San Luis Obispo County is a chronic and pervasive problem. In California methamphetamine is now the most commonly reported primary drug of choice according to data collected by the California Outcomes Measurement System (Cal OMS), surpassing both alcohol and heroin. (Cal OMS, 2007) San Luis Obispo County's Cal OMS data reflects this gloomy picture. At San Luis Obispo County Drug and Alcohol Services (DAS) Methamphetamine is our county's most commonly reported primary drug at

treatment admission, surpassing all other drugs and alcohol. The percentage of clients admitted to treatment with a primary methamphetamine problem in fiscal year 2005-06 was 40%, significantly higher than the State rate of 36%. A higher percentage of women, locally, are seeking treatment for methamphetamine addiction (48%) than men (36%). This figure is higher than the state average of 43% for women, but follows trends seen elsewhere showing that an increasing number of women are becoming addicted to meth. (GPAC, 2005) The San Luis Obispo County Sheriff's Department reports that adult methamphetamine related arrests in SLO County continue to increase. In 2006 there were 398 arrests, an increase of 22% from the year before which saw 325 arrests. The county's Sober Living Environments (SLEs), who will be a major partner in the implementation of this project, report that approximately 90% of their residents are meth addicts in recovery.

One of the great tragedies of this epidemic is the secondary impact methamphetamine production, use, and addiction has on family members, especially young children. The dangers for these children are numerous. In many cases children suffer neglect, abuse, and malnourishment. Many are exposed to the chemicals used in the manufacturing process, and exposed to the smoke, pipes, needles, and paraphernalia of the users. Family life is emotionally chaotic and stressful. Many

families where one or both parents are addicted become homeless, or live in unsafe shelters. The Meth article featured in the introductory section of this grant chronicles the story of one local woman, who could not stop using methamphetamine even as it destroyed the lives around her, caused her to be homeless, and resulted in her children being taken away. When parents are addicted to meth, children's basic physical and emotional needs are often ignored. Compared to other children, children whose parents use drugs or alcohol

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# THE TRIBUNE

**SUNDAY**  
\$86 IN COUPONS IN TODAY'S PAPER

IN CENTRAL COAST LIVING, IS, AND SUNDAY BUSINESS, C1

## For the wine lover

How home winemakers  
More women cracking into  
are thriving in SLO County | the world of wine criticism

MARCH 11, 2007 **SAN LUIS OBISPO COUNTY, CALIFORNIA** \$1.25

**BIG WEST TOURNAMENT | IN SPORTS, D1**

### MUSTANGS FALL TO 49ERS

Cal Poly's shot at NCAA Tournament berth sinks with 94-83 loss to Long Beach State

**A TRIBUNE SPECIAL REPORT: HOW ONE DRUG IS RUINING LIVES ACROSS SLO COUNTY DAY 1 OF 4**

# IN METH'S GRIP

METHAMPHETAMINE IS A SCOURGE ON THE RISE, ADDICTING ACROSS DEMOGRAPHIC LINES, DESTROYING FAMILIES AND TAXING LOCAL LAW ENFORCEMENT AND TREATMENT RESOURCES

**CRYSTAL MENACE**  
After an August bust in San Luis Obispo, an investigator finds "heroin" of meth. (Tribune source says bust was ready for sale. Meth used to be sold with food.)

Methamphetamine is easy to make, cheap to buy and so powerfully addictive that it is wreaking havoc on San Luis Obispo County. The drug's poisonous grip destroys families in increasing numbers every year, and the county's ongoing war against it is costing taxpayers millions of dollars.

These are among the findings of The Tribune's six-month investigation into meth and its impact on the county.

Police, prosecutors and rehabilitation counselors all say meth is the most pervasive and destructive illegal drug in the county, attacking across age, class and gender lines.

It's cheaper than heroin or crack cocaine. For just 57¢, enough to buy one-sixteenth of an ounce, a person can get high for up to three days.

Consider these facts:

- Meth is the illegal drug in at least 90 percent of drug cases prosecuted in county courts. And it was the drug of choice for 40 percent of the 1,143 people who sought treatment last year through County Drug and Alcohol Services, nearly double the number of admissions from just seven years earlier.
- Sheriff's officials seized about 13 pounds of meth last year compared with about 10 pounds in 2005 and three pounds in 2004.
- County Narcotics Task Force members seized 13 labs last year, up from two in 2005.
- Meth is the No. 1 drug destroying families who are referred to the county's Child Welfare System. Last year, 207 children — or 39 percent of the children in foster care — had parents addicted to meth.
- The county lacks enough treatment facilities. It has no detoxification site for substance abusers in crisis and has only 12 beds — for women with children — in a long-term treatment facility. There is no residential treatment for men.

The situation is bleak, and the future only looks worse, experts say.

"Unlike many drugs, methamphetamines touch many different aspects of our community," Sheriff Pat Hodgson said.

"It not only affects the user, but it affects part of our health system, and it affects our environment, and it affects the innocent people in proximity of those who use this particular drug."

Turn to Page A10 to read the first installment of the series. — Tribune staff

**INSIDE TODAY, A10-11**  
METH: A full-page graphic on meth, how it's used and how it works.

**NEWS: STORY** From the FBI to, how we looked, and on 8-year addiction begins.

**SERIES AT A GLANCE**  
**MONDAY:** Rise along on these local meth labs. Plus, Dealer gets an ultimatum.  
**TUESDAY:** County treatment resources are limited. Also, Dealer gets a corner.  
**WEDNESDAY:** More kids are trying meth. Finally, where Dealer is today.

**TO OUR HOME DELIVERY SUBSCRIBERS**  
Due to the time change, our delivery deadline for today's paper was extended to 7 a.m.

**RANCH ACTIVITY BECOMES SPORT**  
Horses and their trainers pull the most brutal kind of contest in a riding setting called. Page B1

**THE DANGERS OF GLOBAL WARMING**  
Droughts, floods and disease will soon hit our climate, according to a report. Page A3

**CHARACTER IS KEY, VOTERS SAY**  
A poll shows that most people are more concerned with character than issues. Page A6

**WEATHER, D12**  
Tide will bring elevated surf, and even more waves to the coast.  
High: 7:45 Low: 4:45

**INDEX**  
Classified: C1  
Dear Abby: D1  
Autism: C2  
Horsepower: D2  
Guns: A  
Lifeline: A2  
Movie prices: C1  
Mystery: B3  
Real estate: B2  
Schedules: B1

are three times more likely to be abused and four times more likely to be neglected. (Wells & Wright, 2004) This environment is damaging to the child in the immediate sense, and also puts them at greater risk for substance abuse later in life. (Huang, Cerbone, and Gfroerer, 1996)

San Luis Obispo County's Department of Social Services (DSS) has unfortunately witnessed significant increases in methamphetamine related cases. Methamphetamine abuse is the number one contributing factor in active child welfare (CWS) cases. The next most critical contributing factors include mental health issues and alcohol abuse. Methamphetamine is a factor in 36% of all local cases in which a child is removed from the home. In some regions of the county over 50% of CWS cases involve methamphetamine as a primary factor. This level of intervention from DSS comes at a high cost to the county's taxpayers. In 2006 there were 78 methamphetamine related child removals, costing the county approximately three million dollars. Finally, data reveals that when compared to parent home youth, foster care youth report much higher rates of substance abuse, poor school attendance and grades, and more violence-related behaviors, as well as more harassment and depression risk. (Austin, Jones and Annon, 2007)

**Problem Statement 5: Methamphetamine production, use, exposure, and related problems are serious threats to the health and well being of the citizens of SLO County, particularly to youth and young adults. The percentage of clients admitted to treatment with a primary methamphetamine problem in fiscal year 2005-06 was 40%, significantly higher than the State rate of 36%. Meth use and production is tightly linked with addiction. crime. iniuries. and death.**

### ***Current Prevention Response***

San Luis Obispo County is proud to have recently received a grant from the California Friday Night Live Partnership and Youth Leadership Institute to implement a meth prevention initiative. This project will utilize a Meth Action Team of youth and adult partners with the objectives of creating dynamic educational materials for local youth, schools, and community groups; launching peer-network social marketing campaigns; and advocating for policy change among local business and lawmaking bodies. One objective of this group is to educate the Agriculture Department at Cal Poly to better train future farmers in understanding the need to regulate anhydrous ammonias and other farm chemicals that act as precursors for meth production.

Other local prevention responses include training for schools, parents, and community groups conducted by DAS. The County Methamphetamine Task Force is made up of law enforcement, health officials, and concerned community members and is chaired by Drug and Alcohol Services. This body seeks to enforce key policies, which restrict the availability of meth precursors as well as track meth-related local arrest and treatment data.

## **SPF STEP 2: CAPACITY BUILDING**

Capacity building involves mobilizing human, organizational, and financial resources to meet project goals. Training and education to promote readiness are also critical aspects of building capacity. (SAMHSA)

### **Community Partnership in the Strategic Planning Process**

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The capacity-building step involves engaging key stakeholders and resources to develop and implement a comprehensive community plan to reduce substance abuse. DAS Prevention has a strong record in convening and engaging partners, key stakeholders, agencies, and the populations and communities that are most affected by AOD problems to plan and implement effective prevention efforts, maintain high levels of commitment, and stay abreast of important changes in the field.

DAS primarily builds capacity through the San Luis Obispo County Prevention Alliance (a.k.a. the Prevention Alliance), which is a network of youth task force and community coalition representatives focused on preventing AOD-related problems in our County. The Prevention Alliance has been integrally involved in planning and, eventually, implementing the SPF process. Regular Prevention Alliance meetings include reviews of DAS Prevention planning and strategies, in order to receive feedback and advisory direction from the community.

Prevention Alliance meetings have been used as a way to keep prevention partners and community groups informed about the Strategic Prevention Framework assessment process, reflect on findings, and assist in setting priorities. In May and August of 2006, the Prevention Alliance was given an overview of, and training on, the Strategic Prevention Framework process by Michael Browning of Prevention By Design. These trainings were also attended by local prevention partner agencies, such as the County Office of Education.

Concurrently, the FNL staff of DAS has received several SPF-specific trainings through semi-annual Consortia and Safe and Drug Free Communities Learning Communities conferences over the past two years.

Other community partnerships key in the SPF process include the County Drug and Alcohol Advisory Board, the SLO Friday Night Live Partnership Board of Directors, the San Luis Obispo County Youth Council, Asset Development Network, County Office of Education, and the Enforcing Underage Drinking Laws advisory group. Specific issue target groups include the DUI Task Force and the County Meth Task Force. These groups have reviewed key problem areas and worked to brainstorm contributing factors to underage alcohol use, adult high-risk alcohol use, DUI, marijuana use among youth, methamphetamine use and other AOD issues. Then the group identified the settings, environments, attitudes, and behaviors that contribute to these problems. The groups included representatives from the entire county, including rural and underserved communities.

Many of the community partnerships utilized in this process have been established for the past decade or more. DAS values the strength of these community collaborations and will continue to build effective community relations in order to provide quality prevention services. Because the field of prevention is rapidly progressing, however, it is imperative that the prevention partners in our community evolve accordingly. In the Needs Assessment and Capacity Building process of the SPF it was made clear that DAS' Prevention Team, along with its community partners, needs to be trained and practiced in current prevention

practices. During this part of the SPF process, the following problem statement was developed:

**Problem Statement 6: County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. Health Agency staff must be trained and practiced in the latest AOD prevention methodology, and learn how to be responsive to other areas of prevention including tobacco, mental health, gambling, and other addictions. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.**

The County of San Luis Obispo currently employs nine full and part-time employees assigned to DAS prevention programs. The programs identified earlier will continue to be utilized to address the problem areas identified herein, while DAS will continue to seek new opportunities to develop specific programming to address areas of concern which lack resources. For instance, DAS is currently working with community partners to build a beverage server-licensing program which will offer regular, current trainings to the hundreds of licensed and event-based alcoholic beverage servers in the County.

### **DAS Training and Technical Assistance**

DAS' primary role with the Prevention Alliance is one of training and technical assistance. Quarterly prevention trainings are offered to community coalitions, agency partners, and the public at large. DAS Prevention Team members assigned to the Prevention Alliance assignment (part of our Drug Free Communities Grant program) coordinate information sharing, training and technical assistance among the County's twelve prevention coalitions. Building capacity among local AOD prevention coalitions in San Luis Obispo County is a key strategy in assisting communities to successfully achieve their prevention goals. A coalition's capacity refers to the ability of members to effect and sustain community change over time. Building capacity is not a one-time event, but something that continues over the life of a coalition. The ability of a coalition to negotiate the other four steps of the Strategic Prevention Framework (assessment, planning, implementation, and evaluation) is largely dependent on the degree to which it has capacity for: creating and sustaining partnerships; using training and education to foster readiness, cultural competence, leadership, and evaluation capacity; and convening meetings and workshops with key stakeholders, coalitions, and others. Recent DAS trainings have included: an overview of the environmental prevention approach to reduce AOD-related problems, social host liability policies, and comprehensive approaches to using media to facilitate the adoption of policy.

In the past few years, DAS provided numerous training and technical assistance opportunities to the community including the Enforcing Underage Drinking Laws (EUDL) coalition, the County Office of Education consortium of school district prevention coordinators, youth councils, the County Asset Development conference, YMCA, municipal recreation and parks youth programs, and several schools throughout the County. Training topics included: youth development, evidence-based environmental prevention strategies, developing partnerships and prevention coalitions, AOD-related problems and contributing factors, developing a needs and resource assessment, facilitating meetings, analyzing data, and developing goals and objectives for addressing priority problems and contributing factors.

## **SPF STEP 3: PLANNING**

Planning involves the creation of a comprehensive plan with goals, objectives, and strategies aimed at meeting the substance abuse prevention needs of the community. During this phase, organizations select logic models and evidence-based policies and programs. They also determine costs and resources needed for effective implementation (SAMHSA).

### **SLO County SPF Planning Process**

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The planning step began in March 2007, when the DAS Prevention Team reviewed key problem areas and identified local factors contributing to underage alcohol use, adult high-risk alcohol use, DUI, marijuana use amongst youth, methamphetamine use and production, and the capacity of prevention partners in SLO County. The focus of this review was on the settings, environments, attitudes, and behaviors that contribute to these problems. During the Spring of 2007, these problems and contributing factors were translated into specific goals and objectives based on the data collected and analyzed during the assessment and capacity building steps.

Goals and objectives were prioritized based on the following criteria:

- Current urgency and need, based on data and anecdotal evidence
- Benefits: Populations served must be at greatest risk
- Effectiveness: Programs to address the priority must be available and culturally competent
- Feasibility: The goals and objectives must be ethically based, and politically feasible in the next five years.

In April 2007, the Prevention Alliance, SLOFNLP, and members of various prevention partnerships reviewed the program action areas, goals and objectives to verify that they reflected the contributing factors identified in Step 1. In addition to the five AOD problem-related priority areas (underage drinking, high-risk adult drinking, DUI, marijuana use among youth, and methamphetamine use and production), goals and objectives were developed in a sixth priority area to enhance the capacity of the AOD prevention system in San Luis Obispo County.

The final step in the planning process was to develop a logic model for goals identified in the six problem-related priority areas (See Appendix A). A logic model is a graphic tool that links the problems and resources in a community to prevention strategies that address the problems and defines the expected results. This logic model also provides a roadmap allowing continual monitoring of program benchmarks establishing a basis for modifications in strategic direction.

This document, *San Luis Obispo County Strategic Prevention Framework*, is the result of this planning process and serves as a comprehensive prevention plan that will systematically reduce the problems identified in Step 1: Assessment. Included in this framework are mission and vision statements adopted by the division of Drug and Alcohol Services and its Prevention Team. These statements help to frame the context and the overall direction of the AOD prevention strategic plan.

## **San Luis Obispo County Prevention Programs**

### ***Problem Statements, Action Areas, and Goals***

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**Problem Statement 1:** SLO County continues to face problems associated with underage alcohol use and abuse. Binge drinking amongst local youth remains higher than the state average, as does recent alcohol use. Teen females now report more alcohol use than males. College drinking also remains a problem with 18-20 year olds facing school penalties, law enforcement problems, and emergency room visits.

#### **Action Area 1: Reduction of Underage Drinking and Related Problems**

**Goal A:** Reduce alcohol-related problems associated with social and retail access to alcohol

**Goal B:** Increase the level of youth's perceived harm associated with alcohol use

**Goal C:** Increase capacity of schools, families, and community organizations to promote healthy youth development and to prevent problems associated with underage alcohol use

**Problem Statement 2:** Alcohol use and abuse amongst the adult population of San Luis Obispo County continues to be a major factor in crime, health problems, DUIs, increased drug use, and suicide. Recent surveys have shown a majority of local university seniors binge drink regularly, and those same adult students had more problems succeeding in school, keeping jobs, and staying healthy. Local treatment statistics for adults confirm that alcohol use is the primary gateway drug of choice.

#### **Action Area 2: Reduction of Adult High-Risk Drinking and Related Problems**

**Goal A:** Reduce alcohol-related problems associated with retail access to alcohol

**Goal B:** Reduce alcohol-related problems associated with social and community events

**Goal C:** Increase capacity of the County, including the local college and university communities, to address reduction of binge drinking amongst the student population

**Problem Statement 3:** Driving Under the Influence is a preventable crime that continues to plague San Luis Obispo County. Saturated alcohol licensing, alcohol-based tourism, rural roads, and a reduced perception of harm contribute to over 1,700 DUI-related injuries and fatalities - and over 1,300 DUI arrestees enrolled in County intervention programs annually.



### Action Area 3: Reduction of Driving Under the Influence and Related Problems

**Goal A: Reduce driving-under-the-influence incidents**

**Goal B: Reduce driving-under-the-influence injuries, and fatalities**

**Problem Statement 4:** Local youth report an increase in marijuana use, with average use over the State level. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. Marijuana use, often approved of by parents, is considered by many school officials to be the main obstacle for healthy academic development.

### Action Area 4: Reduction of Youth Marijuana Use and Related Problems

**Goal A: Reduce marijuana use among youth ages 12-18**

**Goal B: Increase schools' capacity to provide current and accurate information regarding marijuana**

**Problem Statement 5:** Methamphetamine production, use, exposure, and related problems are serious threats to the health and well being of the citizens of SLO County, particularly to youth and young adults. The percentage of clients admitted to treatment with a primary methamphetamine problem in fiscal year 2005-06 was 40%, significantly higher than the State rate of 36%. Meth use and production is tightly linked with addiction, crime, injuries, and death.

### Action Area 5: Reduction of Methamphetamine Use, Production, and Related Problems

**Goal A: Increase community awareness of the availability and harms related to methamphetamine use**

**Goal B: Engage community in policy change that reduces the production and sales of methamphetamine**

**Problem Statement 6:** County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. Health Agency staff must be trained and practiced in the latest AOD prevention methodology, and learn how to be responsive to other areas of prevention including tobacco, mental health, gambling, and other addictions. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.

## Action Area 6: Enhance System Capacity for AOD Prevention

**Goal A: Expand the participation and collaboration of schools, community organizations and individuals in preventing AOD-related problems.**

**Goal B: Develop and implement Health Agency staff training practices to support and improve prevention planning and evaluation.**

**Goal C: Increase the skills of County prevention program team members to enhance their capacity to implement effective prevention practices.**

### SPF STEP 4: IMPLEMENTATION

The implementation phase of the SPF process is focused on carrying out the various components of the prevention plan, as well as identifying and overcoming any potential barriers. During program implementation, organizations detail the evidence-based policies and practices that need to be undertaken, develop specific timelines, and decide on ongoing program evaluation needs. (SAMHSA)

#### SLO County SPF Implementation

Because DAS performs as the primary prevention provider for the County, the DAS Prevention Team will guide the implementation phase of the SPF. The programs and strategies chosen to address the key problem areas, goals and objectives will mainly consist of the programs currently in place. In areas where resources do not currently support the prevention practice being suggested, our Team and its community partners will work to identify potential sources of support and collaboration.

DAS Prevention services operate in relation to the Institute of Medicine's (IOM) prevention definitions. Generally, services directly address specific populations along the continuum, yet several programs address multiple and combined populations. The following chart of DAS Prevention Programs outlines the SPF implementation plan, population targets, IOM prevention categories, and strategies chosen to address problem areas and goals. See Appendix B, Prevention Programs Action Plan, for a list of activity steps that will be taken in implementing each of the stated objectives. Following each action item will be the program responsible for carrying out the objective.

DAS Prevention Programs				
Program	SPF Areas Addressed	Strategies	Populations	IOM Target
Friday Night Live (High School)	1. Underage Drinking 2. DUI 3. Marijuana Use among youth 4. Meth Use and production	Youth Development  Environmental Prevention  Media Advocacy  Education and Skill Building	Teens, school faculty, parents	Universal Selected



## San Luis Obispo County Strategic Prevention Framework

<b>DAS Prevention Programs</b>				
<b>Program</b>	<b>SPF Areas Addressed</b>	<b>Strategies</b>	<b>Populations</b>	<b>IOM Target</b>
Club Live (Middle School)	1. Underage Drinking 2. DUI 3. Marijuana Use among youth	Youth Development  Environmental Prevention  Media Advocacy  Education and Skill Building	Adolescents, school faculty, parents	Universal Selected
FNL Kids (4 <sup>th</sup> – 6 <sup>th</sup> Grade)	1. Underage Drinking 2. DUI 3. Marijuana Use among youth	Youth Development  Environmental Prevention  Education and Skill Building	Adolescents, school faculty, parents	Universal
FNL Mentoring	1. Underage Drinking 3. Marijuana Use among youth 3. Meth Use and production	Youth Development  Environmental Prevention  Education and Skill Building  Problem Identification and Referral	Adolescents, Teens	Selected Indicated
FNL Meth Action Team	1. Meth Use and production	Youth Development  Environmental Prevention  Education and Skill Building	Teens, foster youth, recovery community, LGBTQ youth and college students	Selected Universal
DFC – Coalitions	1. Underage Drinking 2. Adult high-risk drinking 3. DUI 4. Marijuana Use among youth 5. Meth Use and production	Youth Development  Environmental Prevention  Media Advocacy  Education and Skill Building  Information Dissemination	Community leaders, businesses, agencies, youth, faith-based, family resource centers, parents, schools, law enforcement	Universal Selected
School-based counseling (Incl. Dare To Be You curriculum and SAP)	1. Underage Drinking 2. Marijuana Use among youth 2. Meth Use and production	Problem Identification and Referral  Youth Development  Education and Skill Building	Youth (K-12), parents, school faculty	Selected Indicated
Community Outreach –	1. Underage Drinking 2. Adult high-risk	Youth Development	Monolingual, underserved	Universal Selected

## San Luis Obispo County Strategic Prevention Framework

<b>DAS Prevention Programs</b>				
<b>Program</b>	<b>SPF Areas Addressed</b>	<b>Strategies</b>	<b>Populations</b>	<b>IOM Target</b>
Family Strengthening and Juvenile Reentry	drinking 3. Marijuana Use among youth	Environmental Prevention  Media Advocacy  Education and Skill Building  Information Dissemination  Problem Identification and Referral	communities, community leaders, businesses, agencies, youth, faith-based, family resource centers, parents, schools, law enforcement, juveniles in detention	Indicated
"AVOID" Program	1. DUI	Environmental Prevention  Media Advocacy  Education and Skill Building  Information Dissemination	Law enforcement, general public, DUI arrestees	Universal Selected
General Prevention Program	1. Underage Drinking 2. Adult high-risk drinking 3. DUI 4. Marijuana Use among youth 5. Meth Use and production	Education and Skill Building  Information Dissemination  Environmental Prevention  Media Advocacy	General public, businesses, community policy bodies	Universal
<b>Programs in Development</b>				
Beverage Server Training	1. Underage Drinking 2. Adult high-risk drinking 3. DUI	Education and Skill Building  Information Dissemination  Environmental Prevention	Business, community event providers, general public	Universal
Parenting skills program	1. Underage Drinking 2. Marijuana use among youth 3. Meth use and production	Education and Skill Building	Children of addicts, parents, guardians	Selected Indicated

## SPF STEP 5: EVALUATION

Evaluation helps organizations recognize what they have done well and what areas need improvement. The process of evaluation involves measuring the impact of programs and practices to understand their effectiveness and any need for change. Evaluation efforts therefore greatly influence the future planning of a program. It can also impact sustainability, because evaluation can show sponsors that resources are being used wisely. (SAMHSA)

### SLO County SPF Evaluation

DAS' SPF evaluation process will involve collecting process and outcome data using surveys and questionnaires, key informant interviews, focus groups, public records, participant observation, research and other tools. The goal of DAS's SPF evaluation will be to measure the effectiveness and impact of our implemented strategies, programs, policies, and practices. This process is to be ongoing so that areas needing improvement can be identified, addressed, and possibly improved as early as possible.

See Appendix A for a logic model that describes how the proposed strategies will be used to achieve expected outcomes. The logic model provides a visual representation of the overall theory of change and predicted short-term, intermediate, and long-term outcomes and measures. The following list of Indicators and Data Sources demonstrates the foundation of DAS' evaluation plan. This list will be used in combination with the logic model that specifies the measurable changes that will result from the proposed objectives and how these changes will be measured and monitored.

San Luis Obispo County DAS will track changes and trends for the selected long-term data indicators that have been identified for each action area. The data collected and analyzed for current and emerging issues from the following chart, will also be used in future strategic planning.

Long-Term AOD Outcome Indicators and Data Sources, By Action Area	
Indicator	Data Sources
<b>Underage Drinking and Related Problems</b>	
Alcohol Outlet Density	Alcoholic Beverage Control (ABC)
Rate of Illegal Sales of Alcohol to Minors	SLO County ABC Officer, Local law enforcement
Adult Awareness of Teen Drinking	Town Hall Meeting Focus Group
Youth Awareness of Alcohol Risks	CA Healthy Kids Survey (CHKS), Local SDFSC Surveys
Youth Alcohol Use in Past 30 Days	CHKS, Local SDFSC Surveys
Youth Binge Drinking in Past 30 Days	CHKS, Local SDFSC Surveys
Alcohol Advertising Compliance	Planning Commissions, Law enforcement
Age of Onset	CHKS (triangulated), Local SDFSC Surveys
Parent/Child Communication re: Alcohol	Local and Participant Survey

Long-Term AOD Outcome Indicators and Data Sources, By Action Area	
Indicator	Data Sources
Youth perception of parental/peer approval	CHKS, SDFSC
Youth Development (YD) Outcomes (Risk & Protective Factors)	SDFSC, YD Survey
Youth Alcohol-Related Arrests	Police Records, Probation
Youth Perception of Harm of Alcohol	CHKS, SDFSC
Youth Advertising Education Surveys	DAS
Youth Development Outcomes, increased protective factors, decreased risk	SDFSC, YD Surveys
<b>Adult High Risk Drinking</b>	
Server Training Rates	ABC
Disciplinary Actions	ABC
Per Capita Consumption	State Board of Equalization; ADP
County Alcohol Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Fatalities in Alcohol-Involved Accidents, Rate per 100,000	Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol (CHP)
College binge-drinking in past 30 days	CORE Survey (Cal Poly)
Mid-State Fair alcohol sales	Fair Board
DUI Arrests	CHP, Police, DAS
Campus Alcohol Violations	Cal Poly Judicial Affairs, Cuesta College
<b>Reducing DUI</b>	
Fatalities in Alcohol-Involved Accidents, Rate per 100,000	Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol (CHP)
County Alcohol Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Server Training Events	ABC
Community Awareness of DUI Risks	Local Survey and Focus Groups
<b>Youth Marijuana Use</b>	
Community Awareness of Marijuana Risks	CHKS, Focus Group Surveys
Youth Awareness of Marijuana Risks	CHKS, Local SDFSC Surveys
Paraphernalia Sales Violations	Local law enforcement
County Drug Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice

Long-Term AOD Outcome Indicators and Data Sources, By Action Area	
Indicator	Data Sources
	Statistics Center
Youth 30-Day Marijuana Use	CHKS, SDFSC
School-based marijuana violations	School records, Probation
<b>Methamphetamine Use</b>	
Community Awareness of Methamphetamine Risks	CHKS, Focus Group Surveys
County Drug Arrest Rate per 100,000	California Arrest Data, California Department of Justice, Office of the Attorney General, Criminal Justice Statistics Center
Paraphernalia Sales Violations	Local law enforcement
Youth meth use in past 30 days	CHKS, SDFSC
Youth Risk and Protective Factors	SDFSC, YD Survey
<b>Prevention Capacity</b>	
Partner and Client Satisfaction	DAS surveys
Employee Performance	DAS Performance Reviews
Sustainability	Health Agency Administration

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## **APPENDICES**

A. San Luis Obispo County Prevention Programs Action Plan

B. San Luis Obispo County Strategic Prevention Framework (SPF) Logic Model

## San Luis Obispo County Prevention Programs Strategic Prevention Framework

### ACTION PLAN

**Problem Statement 1:** SLO County continues to face problems associated with underage alcohol use and abuse. Binge drinking among local youth remains higher than the state average, as does recent alcohol use. Teen females now report more alcohol use than males. College drinking also remains a problem with 18-20 year olds facing school penalties, law enforcement problems, and emergency room visits.

#### Action Area 1: Reduction of Underage Drinking and Related Problems

##### Goal A: Reduce alcohol-related problems associated with social and retail access to alcohol

###### Objectives

- 1.A.1 Increase merchant compliance with existing laws by 5%, by July 2009
  - *Minor compliance checks – Friday Night Live & local law enforcement*
  - *Retail Alcohol Merchant Awards – Club Live and FNL Kids*
- 1.A.2 Reduce adult provision of alcohol in and around on and/or off-sale outlets by 5%, by July 2009.
  - *Shoulder tap operations – Friday Night Live*
  - *Compliance checks – FNL & local law enforcement*
- 1.A.3 Reduce adult provision of alcohol to youth in homes by 5%, by July 2009.
  - *Social host policy research, advocacy and adoption – Coalitions, FNL, and General Prevention*
  - *Media and marketing strategies – Coalitions & General Prevention*
- 1.A.4 Increase adult awareness of the nature and extent of youth alcohol use and the associated risks by 5%, by July 2009.
  - *Parent forums – FNL, Coalitions*
- 1.A.5 Reduce access to alcohol at public community events by 10%, by July 2010.
  - *Fair compliance checks – FNL, AVOID*
  - *Research other community event licensing and training – AVOID, Coalitions*

##### Goal B: Increase the level of youth's perceived harm associated with alcohol use

###### Objectives

- 1.B.1 Increase capacity of youth and schools to promote honest, healthy realization of alcohol effects, dangers, and potential risks by 5% by July 2009.
  - *School in-service trainings – FNL, General Prevention*
  - *Friday Night Live issues conferences – FNL*
  - *Youth Asset Summit – FNL, Asset Development Network*
- 1.B.2 Increase compliance with legal restrictions on advertising at off-sale alcohol outlets by 5% by July 2009.



- *Marketing surveys – FNL, Club Live, FNL Kids*
- 1.B.3 Decrease alcohol promotions and advertising at community events where youth are present by 10% by July 2010.
  - *Marketing surveys – FNL, Club Live, and FNL Kids*
  - *Advocacy at Fair Board and community event meetings – Coalitions, General Prevention*
- 1.B.4 Increase media exposure of alcohol-related risks and negative impacts by 4 articles/broadcast stories per year.
  - *Create PSAs and news pieces – General Prevention, AVOID*

**Goal C: Increase capacity of schools, families, and community organizations to promote healthy youth development and to prevent problems associated with underage alcohol use**

**Objectives**

- 1.C.1 Increase implementation of evidence-based AOD strategies in schools, with a primary emphasis on local age of onset by one program per year.
  - *School-based counseling (SAP) for high-risk youth – School Counseling*
- 1.C.2 Increase selected prevention programs at local middle and high schools by one school site per year.
  - *Recruit new middle school site agreements – School Counseling*
- 1.C.3 Enhance the capacity of parents and guardians to effectively address alcohol issues with their children by 5% by July 2009.
  - *Implement Strengthening Families program – DAS, General Prevention, Prevention Alliance*
- 1.C.4 Enhance community youth-serving organizations and coalitions' knowledge and capacity to create effective interventions with families and businesses regarding the reduction of underage alcohol use by conducting 4 new trainings per year.
  - *Implement trainings with community groups – Prevention Alliance, FNL, General Prevention*

**Problem Statement 2:** Alcohol use and abuse among the adult population of San Luis Obispo County continues to be a major factor in crime, health problems, DUIs, increased drug use, and suicide. Recent surveys have shown a majority of local university seniors binge drink regularly, and those same adult students had more problems succeeding in school, keeping jobs, and staying healthy. Local treatment statistics for adults confirm that alcohol use is the primary gateway drug of choice.

**Action Area 2: Reduction of Adult High-Risk Drinking and Related Problems**

**Goal A: Reduce alcohol-related problems associated with retail access to alcohol**  
**Objectives**

- 2.A.1 Increase training for beverage servers and salespeople by 50% by July 2010.
  - *Research Responsible Beverage Service (RBS) programming – General Prevention*

- *Conduct assessment for potential server training needs – General Prevention*
- *Begin implementation of server training – General Prevention*

2.A.2 Expand enforcement of existing laws in and around outlets and at community events by 5% by July 2010.

- *Conduct store-front and marketing surveys – FNL, Club Live, FNL Kids*
- *Meet with local law enforcement to sustain overtime funding for compliance checks – General Prevention*

**Goal B: Reduce alcohol-related problems associated with social and community events**

**Objectives**

2.B.1 Reduce per capita consumption of alcohol at local events and venues by 5% by July 2010.

- *Conduct consumption surveys at Fair – FNL, Coalitions*
- *Meet with Fair Board to discuss reduction policies – DAS Advisory Board, General Prevention*
- *Implement reduction policies – General Prevention*

2.B.2 Increase policies that enhance conditional use regulations (i.e. keg registration) by one policy per year.

- *Research local use legislation – Coalitions*
- *Advocate for policy change with local boards - Coalitions*

**Goal C: Increase capacity of the County, including the local college and university communities, to address reduction of binge drinking amongst the student population**

**Objectives**

2.C.1 Increase County presence in campus policy and program venues by participation in four opportunities per year.

- *Attend SUACC and sub-committees – General Prevention*

2.C.2 Increase policies that encourage assessment and evaluation of college alcohol prevention programming by one program assessment per year.

- *Attend SUACC and sub-committees – General Prevention*
- *Advocate for policy adoption – General Prevention*

**Problem Statement 3:** Driving Under the Influence is a preventable crime that continues to plague San Luis Obispo County. Saturated alcohol licensing, alcohol-based tourism, rural roads, and a reduced perception of harm contribute to over 1,700 DUI-related injuries and fatalities - and over 1,300 DUI arrestees enrolled in County intervention programs annually.

**Action Area 3: Reduction of Driving Under the Influence and Related Problems**

**Goal A: Reduce driving-under-the-influence incidents**

### **Objectives**

3.A.1 Increase public awareness of risks associated with DUI by broadcasting 4 new PSA's per year.

- *Create and broadcast new PSAs – AVOID, DUI Task Force*

3.A.2 Increase enforcement of DUI laws, including sobriety checkpoints by 5% by July 2009.

- *Collaborate on MOU with law enforcement agencies - AVOID*

3.A.3 Increase alcohol server training by 50% by July 2010.

- *Research RBS programming – General Prevention*
- *Conduct assessment for potential server training needs – General Prevention*
- *Begin implementation of server training – General Prevention*

### **Goal B: Reduce driving-under-the-influence injuries, and fatalities**

#### **Objectives**

3.B.1 Increase adult passenger awareness, including designated drivers, by producing 4 new PSA's per year.

- *Create and broadcast new PSAs – AVOID, DUI Task Force*

3.B.2 Increase youth passenger awareness, including seatbelt promotion by 4 new school presentations per year.

- *Implement FNL Seat Belt Safety programs – FNL, FNL Kids*

**Problem Statement 4:** Local youth report an increase in marijuana use, with average use over the State level. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. Marijuana use, often approved of by parents, is considered by many school officials to be the main obstacle for healthy academic development.

### **Action Area 4: Reduction of Youth Marijuana Use and Related Problems**

#### **Goal A: Reduce marijuana use among youth ages 12-18**

##### **Objectives**

4.A.1 Increase community and family awareness of the impacts of marijuana use and addiction by producing 4 new trainings per year.

- *Engage youth around media portrayals of marijuana use – FNL, FNLM*
- *Engage community around social marketing of marijuana issues – Prevention Alliance*

4.A.2 Increase the level of youth's perceived harm associated with marijuana use by 5% by July 2010.

- *Implement core FNL Outcomes projects – FNL, FNLM*
- *Engage youth to work with local media to address local media coverage of marijuana issues – FNL, FNLM*

4.A.3 Increase enforcement of existing laws governing sales of drug paraphernalia by 5% by July 2010.

- *Conduct storefront surveys with youth – FNL, Club Live*

- *Research community laws governing paraphernalia – FNL*
- *Evaluate current sales citations with local law enforcement – Prevention Alliance*

**Goal B: Increase schools' capacity to provide current and accurate information regarding marijuana**

**Objectives**

4.B.1 Improve or increase school-based universal prevention education on marijuana by implementing one new program per year.

- *Implement core FNL Outcomes projects – FNL*

4.B.2 Enhance school-based selected and indicated prevention engagements around marijuana by 5% by July 2009.

- *Conduct school in-service – FNL*
- *Meet with County Office of Education to advocate for policies which increase school-based counseling for marijuana referrals (prior to suspension) – School Counseling*

4.B.3 Increase school trainings that address school policies and messaging around marijuana use by implementing 4 new school-based trainings per year.

- *Evaluate current school citations with local law enforcement – Prevention Alliance*

**Problem Statement 5:** Methamphetamine production, use, exposure, and related problems are serious threats to the health and well being of the citizens of SLO County, particularly to youth and young adults. The percentage of clients admitted to treatment with a primary methamphetamine problem in fiscal year 2005-06 was 40%, higher than the State rate of 36%. Meth use and production is tightly linked with addiction, crime, injuries, and death.

**Action Area 5: Reduction of Methamphetamine Use, Production and Related Problems**

**Goal A: Increase community awareness of the availability and harms related to methamphetamine use**

**Objectives**

5.A.1 Enhance school-based education on methamphetamine by two new trainings per year.

- *Implement trainings with Meth Action Team – FNL-Meth*

5.A.2 Increase community awareness of impacts of methamphetamine use in San Luis Obispo County by conducting 4 new trainings or PSA's per year.

- *Implement trainings and create PSAs with Meth Action Team – FNL-Meth*

5.A.3 Develop and deliver accurate, relevant and culturally appropriate methamphetamine prevention media messages.

- *Train Meth Action Team in cultural competence for meth prevention - FNL*

**Goal B: Engage community in policy change that reduces the production and sales of methamphetamine**

**Objectives**

5.B.1 Create a Meth Action Team, consisting of youth and adults, as a subgroup of the SLO County Meth Task Force.

- *Form team with referrals from MAP, Treatment, and Community – FNL-Meth*

5.B.2 Increase community-level organization and responsiveness in partnership with law enforcement by an increase of two youth and coalition members on the County's Meth Task Force by July 2009.

- *Promote recruitment with Meth Action Team – FNL Meth*

5.B.3 Increase enforcement of existing laws governing sales of drug paraphernalia and methamphetamine precursor chemicals by 5% by July 2010.

- *Research and survey retail regulations regarding meth products – FNL Meth Action Team*
- *Partner with law enforcement to monitor compliance – FNL-Meth*

**Problem Statement 6:** County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. Health Agency staff must be trained and practiced in the latest AOD prevention methodology, and learn how to be responsive to other areas of prevention including tobacco, mental health, gambling, and other addictions. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.

**Action Area 6: Enhance System Capacity for AOD Prevention**

**Goal A: Expand the participation and collaboration of schools, community organizations and individuals in preventing AOD-related problems.**

**Objectives**

6.A.1 Expand the SLO County Prevention Alliance to include the active participation of a broad range of community members and sectors (e.g., faith, law enforcement, schools, youth, parents, etc).

- *Increase coalition prevention programming – DAS Coalition-based prevention*
- *Participate in collaboratives with new, potential partners – DAS Coalition-based prevention*

6.A.2 Develop effective training for community coalitions and partners around research-based prevention practices to better support the mission of the Drug and Alcohol Services Prevention Programs.

- *Quarterly P.A. Trainings – DAS Coalition-based prevention*

6.A.3 Increase opportunities to engage youth as leaders and resources in the prevention of alcohol, tobacco, and other drug use and its related problems.

- *Recruitment of FNL members, youth program participants – FNL staff and school counselors*

6.A.4 Increase adult partnerships with youth via prevention programming and opportunities stemming from youth development projects.

- *Coalition training, community partnership events (ie Red Ribbon) – DAS Coalition-based prevention, FNL*

6.A.5 Increase youth capacity for providing prevention opportunities amongst their peers, schools, and communities.

- *Make links for youth between FNL programming and prevention outcomes – FNL*
- *Increase youth involvement in tobacco, mental health, obesity, and other issue prevention and health promotion – DAS prevention staff projects*

**Goal B: Develop and implement Health Agency staff training practices to support and improve prevention planning and evaluation.**

**Objectives**

6.B.1 Engage staff with best practices and updates on latest research.

- *Increase staff training, annual prevention updates – DAS prevention and management*

6.B.2 Provide training and technical assistance to prevention staff on program best practices, including evaluation.

- *Increase staff training, annual prevention updates – DAS prevention and management*

6.B.3 Ensure all prevention staff implement evidence-based programming.

- *Performance reviews – DAS management*

6.B.4 Enhance or increase community engagement and partnerships in Health Agency prevention programming.

- *Engage community via new opportunities such as MHSA PEI – DAS staff*

**Goal C: Increase the skills of County prevention program team members to enhance their capacity to implement effective prevention practices.**

**Objectives**

6.C.1 Engage staff in the capacity to identify and track goals, objectives, and other key indicators.

- *Increase staff training, annual prevention updates – DAS prevention and management*

6.C.2 Disseminate annual outcomes report to key stakeholder groups.

- *Develop Annual report for CalOMS – DAS prevention and management*

6.C.3 Review data to identify emerging needs and priorities. Revise goals and objectives, as needed.

- *Annual Prevention outcomes retreat – DAS prevention and management*

6.C.4 Increase community awareness of alcohol, tobacco, and other drug use, abuse, and related problems.

- *Increase community engagement as method of expanding staff skills and capacities – DAS prevention and management*

## San Luis Obispo County SPF Logic Model

<b>Problem Statement 1:</b> SLO County continues to face problems associated with underage alcohol use and abuse. Binge drinking among local youth remains higher than the state average, as does recent alcohol use. Teen females now report more alcohol use than males. College drinking also remains a problem with 18-20 year olds facing school penalties, law enforcement problems, and emergency room visits.				<b>CONTRIBUTING FACTORS</b> <ul style="list-style-type: none"> <li>Youth access to alcohol</li> <li>Decreased perceived harm of alcohol's effects</li> <li>Lack of community education and resources to respond</li> </ul>		
GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Reduce alcohol-related problems associated with social and retail access to alcohol	Increase merchant compliance with existing laws by 5%, by July 2009	Minor Compliance Checks with FNL youth, Training for Retail Employees	Increase rate of Minor Compliance checks	Partnerships with law enforcement to conduct Minor Compliance, shoulder-tap operations, and training for employees	Decreased rates of sales to minors	Liquor law violations (Local police records, ABC)
	Reduce adult provision of alcohol in and around on and/or off-sale outlets by 5%, by July 2009	Shoulder-Tap Operations, Training for Retail Employees	Increase rate of shoulder tap operations			Youth alcohol use in past 30 days (CHKS, SDFSC)
	Reduce adult provision of alcohol to youth in homes by 5%, by July 2009	Social Host Policies, Parent Education	Increased coalition dialogue on issue of social host policies	Decreased number of parties where alcohol is served to teens by adults	Decreased youth alcohol-related problems	Youth binge-drinking in past 30 days (CHKS, SDFSC)
	Increase adult awareness of the nature and extent of youth alcohol use and the associated risks	Media Advocacy, Parent Education	Media and public opportunities for adults on issues of underage drinking		Decreased minor DUI and possession arrests	Youth drinking and driving (CHP)
	Reduce access to alcohol at public community events by 10%, by July 2010	Develop comprehensive policies aimed at reducing use permits, and increasing training	Assessment of Fair and current public event alcohol policies	Decreased youth alcohol-related arrests at the Mid-State Fair and other public events		Youth alcohol-related Arrests (Police, probation)

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Increase the level of youth's perceived harm associated with alcohol use</b>	Increase capacity of youth and schools to promote honest, healthy realization of alcohol effects, dangers, and potential risks by 5% by July 2009	Education and skill building through FNL, School in-service training	Increase FNL Chapter activities around alcohol, increase school trainings	Improved school responses to CHKS results	Decreased rates of youth alcohol use  Decreased youth alcohol-related problems  Increased youth perceived harm of alcohol	Youth alcohol use in past 30 days (CHKS, SDFSC)
	Increase compliance with legal restrictions on advertising at off-sale alcohol outlets by 5%, by July 2009	Marketing surveys performed by youth, Training for Retail Employees	Increase rate of youth-led marketing surveys, sales trainings	Decrease in youth-targeted alcohol advertising		Youth perceived harm of alcohol (CHKS, SDFSC)
	Decrease alcohol promotions and advertising at community events where youth are present by 5%, by July 2009	Social Host Policies, Parent Education	Increased coalition dialogue on issue of social host policies	Decreased number of alcohol advertisements at the Fair and other community events		Youth binge-drinking in past 30 days (CHKS)  Liquor law violations (Local police records, ABC)
	Increase media exposure of alcohol-related risks and negative impacts by 10%, by July 2010	Media Advocacy, Parent Education	Media and public forum opportunities for adults on issues of underage drinking	Increased youth media education and advocacy		Youth Advertising Education Surveys (DAS)  Youth alcohol-related Arrests (Police, probation)



GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Increase capacity of schools, families, and community organizations to promote healthy youth development and to prevent problems associated with underage alcohol use</b>	Increase implementation of evidence-based AOD strategies in schools, with a primary emphasis on local age of onset by one program per year	FNL Youth Development, FNL Outcomes Project	Increased school awareness of FNL SPF Outcomes Project	Partnerships with schools to better address age of onset issues	Decreased rates of youth alcohol use	Youth perceived harm of alcohol (CHKS, SDFSC)  Youth alcohol use in past 30 days (CHKS, SDFSC)  Youth Development Outcomes, increased protective factors, decreased risk (SDFSC, YD Surveys)  Youth binge-drinking in past 30 days (CHKS)  Youth perception of parental/peer approval (CHKS, SDFSC)  Age of alcohol use onset (CHKS)
	Increase selected prevention programs at local middle and high schools by one school site per year	Selected and Indicated Prevention counseling	Increase in school counseling training for DAS Staff			
	Enhance the capacity of parents and guardians to effectively address alcohol issues with their children by 5% by July 2009	Strengthening Families, Parent Education	Increased DAS programming for parents in crisis and families of addiction	Increased program response for families with addiction issues	Decreased youth alcohol-related problems	
	Enhance community youth-serving organizations and coalitions' knowledge and capacity to create effective interventions with families and businesses regarding the reduction of underage alcohol use by conducting 4 new trainings per year	Training, Information Dissemination	Increased training for community groups	Increased community capacity for underage drinking prevention	Delayed age of onset – reduced use at 7 <sup>th</sup> grade level	

<p><b>Problem Statement 2:</b> Alcohol use and abuse among the adult population of San Luis Obispo County continues to be a major factor in crime, health problems, DUIs, increased drug use, and suicide. Recent surveys have shown a majority of local university seniors binge drink regularly, and those same adult students had more problems succeeding in school, keeping jobs, and staying healthy. Local treatment statistics for adults confirm that alcohol use is the primary gateway drug of choice.</p>	<p><b>CONTRIBUTING FACTORS</b></p> <ul style="list-style-type: none"> <li>• Need for beverage server and retail sales training</li> <li>• Decreased perceived harm of alcohol's effects</li> <li>• Lack of policies which reduce access to alcohol</li> </ul>
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GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Reduce alcohol-related problems associated with retail access to alcohol	Increase training for beverage servers and salespeople by 50% by July 2010	Responsible Beverage Server Training	Increased training for local alcohol service outlet employees	Partnerships with local businesses to provide certificated training program	Decreased rates of sales to minors and inebriated customers	Liquor law violations (Local police records, ABC)
	Expand enforcement of existing laws in and around outlets and at community events by 5% by July 2010	Develop comprehensive policies aimed at reducing use permits, and increasing training	Increased assessment of law compliance and violations	Partnerships with law enforcement to increase patrols and citations of violations	Decreased adult alcohol related problems  Decreased adult DUI and alcohol-related arrests	College binge-drinking in past 30 days (CORE)  College-aged drinking and driving (CHP)  Alcohol-related Arrests (Police, probation)

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Reduce alcohol-related problems associated with social and community events</b>	Reduce per capita consumption of alcohol at local events and venues by 5% by July 2010	Policy adoption and change, Increased enforcement, Community education	Increased assessment of consumption rates at Fair and other events	Partnerships with community event hosts to reduce alcohol marketing	Decreased adult alcohol-related problems at public events	Liquor law violations (Local police records, ABC)  Mid-State Fair alcohol sales (Fair Board)
	Increase policies that enhance conditional use regulations (i.e. keg registration) by one policy per year	Policy adoption and change	Increased policies restricting alcohol availability at public events	Acceptance of policies which restrict alcohol availability at community events	Decreased alcohol availability at public events	Adult alcohol-related Arrests (Police, probation)

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Increase capacity of the County, including the local college and university communities, to address reduction of binge drinking among the student population</b>	Increase County presence in campus policy and program venues by participation in four opportunities per year	Education of college administrators, faculty and students, Policy advocacy	Increased participation in local college policy	Partnerships with college campus substance use prevention groups	Increased responsiveness of college community to alcohol-related problems  Increased collaboration with college community	Campus alcohol violations (Cal Poly Judicial Affairs)  College binge-drinking in past 30 days (CORE)  College-aged drinking and driving (CHP)
	Increase policies that encourage assessment and evaluation of college alcohol prevention programming by one program assessment per year	Develop comprehensive policies aimed at measuring campus alcohol use and effectiveness of policies	Increased policy planning in campus coalitions	Increased assessment of college alcohol use and perceptions		

**Problem Statement 3:** Driving Under the Influence is a preventable crime that continues to plague San Luis Obispo County. Saturated alcohol licensing, alcohol-based tourism, rural roads, and a reduced perception of harm contribute to over 1,700 DUI-related injuries and fatalities - and over 1,300 DUI arrestees enrolled in County intervention programs annually.

**CONTRIBUTING FACTORS**

- Lack of community awareness
- Decreased perceived harm of alcohol's effects
- Need for server training

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Reduce driving-under-the-influence incidents	Increase public awareness of risks associated with DUI by broadcasting 4 new PSAs per year	Media Advocacy, Education and Information Dissemination	Increased capacity for DUI Task Force in creating public service announcements	Increase in public engagement of DUI issues	Decreased rates of DUI	DUI Arrests (Local police records, CHP)
	Increase enforcement of DUI laws, including sobriety checkpoints by 5% by July 2009	Environmental policy	Partnership with law enforcement in establishing check points	Increased DUI arrests		DUI Injuries and fatalities (CHP, SWITRS)
	Increase alcohol server training by 50% by July 2010	Education and skill building	Increased trainings for on-sale servers	Decreased number of parties where alcohol is served to teens by adults		

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Reduce driving-under-the-influence injuries and fatalities	Increase adult passenger awareness, including designated drivers, by producing 4 new PSAs per year	Media Advocacy, Education and Information Dissemination	Increased capacity for DUI Task Force in creating public service announcements	Increase in public engagement of DUI issues	Decreased DUI-related injuries	DUI Injuries and fatalities (CHP, SWITRS)
	Increase youth passenger awareness, including seatbelt promotion by 4 new school presentations per year	Education and skill building, Youth development	Increased seat belt awareness activities in FNL Chapters	Increased seat belt usage among youth and their parents	Decreased DUI-related fatalities	

**Problem Statement 4:** Local youth report an increase in marijuana use, with average use over the State level. Adult treatment clients report marijuana use as their primary drug of choice, often with addictions beginning in adolescence. Marijuana use, often approved of by parents, is considered by many school officials to be the main obstacle for healthy academic development.

**CONTRIBUTING FACTORS**

- Lack of marijuana-specific education
- Decreased perceived harm of marijuana's effects
- Lack of family awareness resulting in supported use

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Increase schools' capacity to provide current and accurate information regarding marijuana	Improve or increase school-based universal prevention education on marijuana by implementing one new program per year	Education and skill building, Youth Development	Increased FNL opportunity focused on marijuana	Increased youth-led peer education focused on marijuana	Decreased use of marijuana  Increased perceived harm of marijuana	School-based marijuana violations (School records, Probation)  Youth marijuana use in past 30 days (CHKS, SDFSC)  Youth perception of marijuana harm (CHKS, SDFSC)
	Enhance school-based selected and indicated prevention engagements around marijuana by 5% by July 2009	Problem identification and Referral, Education and Skill Building	Training of school personnel in referring youth into prevention counseling in lieu of suspension	Increased completions of SAP and school-based counseling programs by youth with marijuana as a primary drug of referral		
	Increase school trainings, which address school policies and messaging around marijuana use by implementing 4 new school-based trainings per year.	Community capacity building, Education and Skill Building	Training of school personnel in referring youth into prevention counseling in lieu of suspension	Increased policies aimed at promoting consistent message of marijuana's health effects		

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Reduce marijuana use among youth ages 12-18</b>	Increase community and family awareness of the impacts of marijuana use and addiction by producing 4 new trainings per year	Education and skill building	Increased participation of families in marijuana-specific education and training	Increased capacity to identify and treat marijuana use among youth	Decrease use of marijuana among youth ages 12-18	Paraphernalia law violations (Local police records)
	Increase the level of youth's perceived harm associated with marijuana use by 5% by July 2010	Education and skill building	Increased marijuana-specific sessions in SAP and FNL programs	Decreased risk factors	Increased perceived harm of marijuana	Youth marijuana use in past 30 days (CHKS, SDFSC)
	Increase enforcement of existing laws governing sales of drug paraphernalia by 5% by July 2010	Policy monitoring, enforcement	Increased assessment of local retail drug paraphernalia	Partnership with law enforcement to enhance retail monitoring		Youth perception of marijuana harm (CHKS, SDFSC)



**Problem Statement 5:** Methamphetamine production, use, exposure, and related problems are serious threats to the health and well being of the citizens of SLO County, particularly to youth and young adults. The percentage of clients admitted to treatment with a primary methamphetamine problem in fiscal year 2005-06 was 40%, significantly higher than the State rate of 36%. Meth use and production is tightly linked with addiction, crime, injuries, and death.

**CONTRIBUTING FACTORS**

- Access to precursor chemicals
- Lack of community education and resources to respond
- Lack of youth-driven prevention messages

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Engage community in policy change that reduces the production and sales of methamphetamine</b>	Create a Meth Action Team, consisting of youth and adults, as a subgroup of the SLO County Meth Task Force	Youth Development, Community Capacity	Increase in youth involvement in meth prevention	Youth demonstrate increased skills in presentations and policy advocacy	Decreased production of methamphetamine  Decreased use of methamphetamine  Increased retail compliance	Retail law violations (Local police records)
	Increase community-level organization and responsiveness in partnership with law enforcement by an increase of two youth and coalition members on the County's Meth Task Force by July 2009	Youth Development, Community Capacity	Increase in community involvement in meth prevention	Public knowledge of Meth Task Force activities		Youth meth use in past 30 days (CHKS)
	Increase enforcement of existing laws governing sales of drug paraphernalia and methamphetamine precursor chemicals by 5% by July 2010	Policy monitoring, enforcement	Increased assessment of local retail drug paraphernalia	Partnership with law enforcement to enhance retail monitoring		Youth Risk and Protective Factors (SDFSC, YD Survey)
						Meth-related arrests (Local police records)

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GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Increase community awareness of the availability and harms related to methamphetamine use	Enhance school-based education on methamphetamine by two new trainings per year	Education and skill building, Youth Development	Increased FNL opportunity focused on meth	Increased youth-led peer education focused on meth	Decreased production of methamphetamine  Decreased use of methamphetamine	Youth meth use in past 30 days (CHKS)  Youth Risk and Protective Factors (SDFSC, YD Survey)  Meth-related arrests (Police records)
	Increase community awareness of impacts of methamphetamine use in San Luis Obispo County by conducting 4 new trainings or PSAs per year	Education and skill building, Media advocacy	Increased capacity for Meth Action Team in creating public service announcements	Increase in public engagement of meth issues		
	Develop and deliver accurate, relevant and culturally appropriate methamphetamine prevention media messages	Media Advocacy, Skill Building	Opportunities for youth to gain media skills and cultural competence training	Increase in public engagement of meth issues		

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<p><b>Problem Statement 6:</b> County prevention efforts need to take a balanced approach that includes environmental factors as well as community, group, and individual-based programming. Health Agency staff must be trained and practiced in the latest AOD prevention methodology, and learn how to be responsive to other areas of prevention including tobacco, mental health, gambling, and other addictions. County prevention partners require support to increase capacity in environmental, community, and identified group prevention responses.</p>	<p><b>CONTRIBUTING FACTORS</b></p> <ul style="list-style-type: none"> <li>• Rapidly progressing field</li> <li>• Turnover of staff and community partners</li> <li>• Lack of community education and resources to respond</li> </ul>
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GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
Expand the participation and collaboration of schools, community organizations and individuals in preventing AOD-related problems	Expand the SLO County Prevention Alliance to include the active participation of a broad range of community members and sectors (e.g., faith, law enforcement, schools, youth, parents, etc)	Community capacity building	Increased promotion of coalition participation countywide	Increase in Prevention Alliance coalition rosters	Increased community response to alcohol and other drug problems	Partner Surveys (DAS)  Prevention Alliance Grant Reports (DAS)  FNL Participant Surveys (YD Survey)  Community Surveys (DAS)
	Develop effective training for community coalitions and partners around research-based prevention practices to better support the mission of the Drug and Alcohol Services Prevention Programs	Training, Environmental Policy	Increased trainings and participation from Prevention Alliance members	Increased localized trainings from Prevention Alliance coalitions		
	Increase opportunities to engage youth as leaders and resources in the prevention of alcohol, tobacco, and other drug use and its related problems.	Outreach, Friday Night Live, Leadership training	Increased membership in FNL Chapters, community and school-based youth-led projects	Improved prevention efforts amongst youth and on school campuses		
	Increase youth capacity for providing prevention opportunities amongst their peers, schools, and communities.					
	Increase adult partnerships with youth via prevention programming and opportunities stemming from youth development projects.	Coalition training, FNL, boards and commission engagement	Increased youth-adult partnerships engaged in prevention	Improved prevention outcomes and resiliency for youth		

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GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Increase the skills of County prevention program team members to enhance their capacity to implement effective prevention practices</b>	Engage staff in the capacity to identify and track goals, objectives, and other key indicators	Training, performance goal-setting, performance reviews	Increased training	Ability for staff to set results-based goals and objectives	Improved service provision	Partner Surveys (DAS)
	Disseminate annual outcomes report to key stakeholder groups	Information dissemination, advocacy	Increased awareness of DAS Prevention programs	Improved knowledge of DAS prevention programming and partnerships	Increased community awareness of Health Agency Prevention efforts	Client Satisfaction Surveys (DAS)
	Review data to identify emerging needs and priorities. Revise goals and objectives, as needed	Quarterly staff meetings, Data reviews, Partner surveys, Advocacy	Increased collaborations with community partners around data and evaluation	Increased staff capacity around data analysis	Increased support for DAS Prevention programming	Employee Performance Reviews (DAS)
	Enhance or increase community engagement and partnerships in Health Agency prevention programming.	Community-based processes, MHSA-PEI implementation, collaboratives	Increased collaborations with community partners	Improved prevention efforts amongst community collaboratives		Funding Increases (DAS)

GOAL	OBJECTIVES	STRATEGIES	EXPECTED OUTCOMES			MEASUREMENT INDICATORS
			SHORT TERM	INTERMEDIATE	LONG TERM	
<b>Develop and implement Health Agency staff training practices to support and improve prevention planning and evaluation</b>	Engage staff with best practices and updates on latest research	Ability for staff to identify and implement best-practice based programming	Increased awareness of best practices and evaluation	Quarterly staff meetings, Performance Reviews	Improved service provision	Partner Surveys (DAS)
	Training, peer reviews	Provide training and technical assistance to prevention staff on program best practices, including evaluation	Ability for staff to evaluate best-practice based programming	Increased performance reviews	Increased support for DAS Prevention programming	Client Satisfaction Surveys (DAS)
	Increased training	Training, Supervisor reviews	Ensure all prevention staff implement evidence-based programming	Increased ratings on performance reviews	Increased staff engagement with multiple sectors of population	Employee Performance Reviews (DAS)
	Increase community awareness of alcohol, tobacco, and other drug use, abuse, and related problems.	Media, education, information dissemination	Increased education and information dissemination projects	Improved delivery of prevention messages		Funding Increases (DAS) Public awareness surveys (DAS)